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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE UTILITY PATENT APPLICATION TRANSMITTAL

PATENT Pages

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: David L. Thompson et al.

TITLE: METHOD AND APPARATUS FOR AUTOMATIC IMPLANTABLE MEDICAL LEAD RECOGNITION AND CONFIGURATION

Printed Name
Signature

Signature

03917 U.S.PTC 10/714123

MAIL STOP PATENT APPLICATION Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

We are	transmitti	ng herewith the attached:						
X	Patent A	atent Application Transmittal						
X	Specific	Total pages: <u>28</u> (including claims and abstract: Spec. <u>21</u> sheets; Claims <u>6</u> sheets; Abstract <u>1</u>						
X	Drawing	rawings:						
		Total sheets: _7_						
	Combin	copy from prior application Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b)						
x	Accomp	Notification of filing a Assignment of the Invention to Medtronic, Inc. Assignment cover sheet Information Disclosure Statement PTO Form 1449 Copies of IDS citations Preliminary Amendment A copy of the Petition or Conditional Petition for Extension of Time in the prior application. Return Postcard						
IF A CO	NTINUIN	G APPLICATION:						
		Continuation Divisional Continuation-in-part (CIP) of prior application No. 09/907,308, filed July 17, 2001.						
	 Amend the specification by inserting before the first line the sentence:This application is a disapplication Serial No. 09/907,308, filed July 17, 2001, now allowed Cancel in this application original claims 2-42 of the prior application before calculating the filing (At least the original independent claim must be retained for filing purposes.) 							
	\boxtimes	The prior application is assigned of record to Medtr nic, Inc.						
	The Power of Attorn y in the prior application is to : Girma Wolde-Michael.							

	This application claims the benefit of U.S.	Provisional Application(s) Serial No.(s), filed
X	Address all future correspondence to:	Elisabeth L. Belden, Reg. No. 50,751 Telephone: (763) 514-4083 No. 27581

FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee		No. of Extra Claims	Rate	Fee
Total Claims	9	20	=	0	x 18	0
Independent Claims	1	3	=	0	x 84	0
Multiple Dependent Claims	0			0	+ 280	0
Basic Filing Fee				•		\$750.00
		-			TOTAL	750.00

X Charge Deposit Account No. 13-2546 in the amount of \$770.00 for the filing fee and assignment recordation fee of \$40.00.

X The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

November 13, 2003

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27581